

(Rev. 5/05)

**FORM TO BE USED BY A PRISONER IN FILING A COMPLAINT
UNDER THE CIVIL RIGHTS ACT, 42 U.S.C. §1983**

**IN THE UNITED STATES DISTRICT COURT
FOR THE DISTRICT OF DELAWARE**

(1) Sandra J. White
(Name of Plaintiff) (Inmate Number)

9008 GreenTop Rd Lincoln, DE 19960
(Complete Address with zip code)
421-9337

(2) _____
(Name of Plaintiff) (Inmate Number)

06 008

(Case Number)

(to be assigned by U.S. District Court)

(Complete Address with zip code)

(Each named party must be listed, and all names
must be printed or typed. Use additional sheets if needed)

vs.

(1) Det Marzec
(2) Agent Tom Jacobs
(3) Agent Chris Quaglino
(Names of Defendants)

(Each named party must be listed, and all names
must be printed or typed. Use additional sheets if needed)

CIVIL COMPLAINT

☒ Jury Trial Requested

I. PREVIOUS LAWSUITS

A. If you have filed any other lawsuits in federal court while a prisoner, please list the caption and case number including year, as well as the name of the judicial officer to whom it was assigned:

N/A

II. EXHAUSTION OF ADMINISTRATIVE REMEDIES

In order to proceed in federal court, you must fully exhaust any available administrative remedies as to each ground on which you request action.

- A. Is there a prisoner grievance procedure available at your present institution? ☐ Yes ☐ No N/A
- B. Have you fully exhausted your available administrative remedies regarding each of your present claims? ☐ Yes ☐ No N/A
- C. If your answer to "B" is Yes:
1. What steps did you take? _____
 2. What was the result? _____
- D. If your answer to "B" is No, explain why not: _____

III. DEFENDANTS (in order listed on the caption)

- (1) Name of first defendant: Det Marzec
 Employed as Police Officer at Town of Delmar
 Mailing address with zip code: 400 South Pennsylvania Ave., Delmar Delaware/Maryland
- (2) Name of second defendant: Agent Tom Jacobs 218175
 Employed as DEA Agent at Drug Enforcement Agency
 Mailing address with zip code: U.S. Dept of Justice 950 Pennsylvania Ave N.W Washington, D.C. 20530
- (3) Name of third defendant: Agent Chris Quaglino
 Employed as DEA Agent at Drug Enforcement Agency
 Mailing address with zip code: U.S. Dept of Justice 950 Pennsylvania Ave N.W. Washington, D.C. 20530
 (List any additional defendants, their employment, and addresses with zip codes, on extra sheets if necessary)

IV. STATEMENT OF CLAIM

(State as briefly as possible the facts of your case. Describe how each defendant is involved, including dates and places. Do not give any legal arguments or cite any cases or statutes. Attach no more than three extra sheets of paper if necessary.)

1. On 9-21-05, I was over my daughter's Tawanda Weatherspoon's house and I was approached by several men who didn't identify themselves as Police Officers
2. who pointed a loaded gun at me and made me stand and patted me down ~~and handcuffed~~ and handcuffed me. I wasn't under arrest for any crime or told I was under arrest.
3. Det Marzec and the other 2 named defendants are those officers. They executed a search warrant for Ellendate Delaware in Lincoln Delaware and I'm recovering from Major Surgery and this jeopardize my life & well being

V. RELIEF

(State briefly exactly what you want the Court to do for you. Make no legal arguments. Cite no cases or statutes.)

1. I seek Declaratory Judgment verify violation of 4th & 14th Amendments rights and Compensatory Relief in the amount of \$500,000 per defendant for abuse and Mental Anguish I suffered

2. Needlessly, I seek
Injunction Relief preventing
these officers from harming
me in the future
3. The compensation relief is
because of the Emotional
distress potential harm I
have incurred All this was
done at gun point

I declare under penalty of perjury that the foregoing is true and correct.

Signed this 2 day of January, 2006.

Sandra S. White
(Signature of Plaintiff 1)

(Signature of Plaintiff 2)

(Signature of Plaintiff 3)